Completed By:







MONTHLY TOTAL ORGANIC CARBON REMOVAL REPORTING

State Form 53284 (6-07) Indiana Department of Environmental Management (IDEM) Office of Water Quality - Drinking Water Branch - Compliance Section

NSTRUCTIONS: Please submit completed forms to:		/ater, Mail Code 66-34	, 100 N Senate Ave, Ir	ndianapolis, IN 46204-2	2251
PWSID: Plant Nun	n: System Name:				
	Plant Name:				
This form must be completed and Mc	nitoring Peri	iod (MM/DD/YY	YYY): Please sub	omit completed form to:	İ
submitted to IDEM within the first ten (10) days after the end of the	/ 0 1	/ 2 0	IDEM	- OWQ Drinking Water	- MC 66-34
monitoring period in which the samples were collected.	/ 0 1	. / [2 0]		Senate Avenue napolis, IN 46204-2251	
Tooting to Cortification	Name			, .	
TestingLabCertification: Laboratory	Name:				
		Contact Phone No.			
CollectionDate(MM/DD/YY): Lab Contact	ct Person:		Contact	Phone No:	
Sample ID:			TOC Analytica	al Method:	
			5310B	5310C	5310D
These are your <u>tests</u> re	And thes	And these are calculated/obtained results:			
(A) Treated Water TOC:	mg	' ' '	(C) Achieved TOC Removal:		
		= [1-(A	A)/(B)]*100		
(B) Source Water TOC: mg/L			(E) Required TOC Removal:		
		(From I	Matrix Below)		
(D) Source Water Alkalinity:			(C/E) Ratio:		
		(Divide	(Divide C by E Above)		
<u></u>				_	
Step 1 TOC Table: Required TOC Removal Matrix					
Source Water	Source Water Source Water Alkalin				
TOC (mg/L)	0-60	>60-120	>120	1	
>2.0 to 4.0	35.0%	25.0%	15.0%	1	
>4.0 to 8.0	45.0%	35.0%	25.0%		
>8.0	50.0%	40.0%	30.0%		
	1				
Notes:					
- At least one set of "paired" TOC samples an	d one source water alka	linity sample must be	collected each month.		
The first of these "paired" samples must be a The alkalinity sample must be collected simulated.				amnle is collected	
- Compliance is determined based on a four-q	uarter running annual av	verage of monthly sam	ples averaged quarter	ly, as applicable.	
 All the samples collected and analyzed shall number of samples required. 	be included in determin	ing compliance, even	it the number of sampl	es exceeds the minimu	mı
- The use of a certified laboratory is not requir	ed for TOC analysis, bu	t a state-approved met	thod must be used (e.g	g., Method 5310).	
I hereby certify that all the informat	ion submitted here	ein is true and ac	curate to the bes	t of my knowledg	je.

Date:

Reviewed by: